



Application Data Sheet

Application Information

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| Application number:: | |
| Filing Date:: | December 12, 2001 |
| Application Type:: | Utility |
| Subject Matter:: | |
| Suggested Classification:: | |
| Suggested Group Art:: | |
| CD-ROM or CD-R?:: | None |
| Number of CDs:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | |
| Computer Readable Form (CRF)?:: | No |
| Number of Copies of CRF:: | |
| Title:: | Method and Apparatus for Managing Components |
| Title:: | In An IT System |
| Attorney Docket Number:: | 111345.122 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 15 |
| Small Entity?:: | Yes |
| Latin Name:: | |
| Variety Denomination Name:: | |
| Petition Included?:: | No |
| Petition Type:: | |
| Licensed US Govt. Agency:: | No |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

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| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | US |
| Status:: | Full Capacity |
| Given Name:: | Jeffrey |
| Middle Name:: | John |
| Family Name:: | Anuszczyk |
| City of Residence:: | Framingham |
| State or Province of Residence:: | MA |
| Country of Residence:: | US |
| Street of Mailing Address:: | 394 Edmands Road |
| City of Mailing Address:: | Framingham |

State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 01701

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: David
Middle Name:: Jay
Family Name:: Barbrow
City of Residence:: Newton
State or Province of Residence:: MA
Country of Residence:: US
Street of Mailing Address:: 60 Halcyon Road
City of Mailing Address:: Newton
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 02459

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Firdaus
Middle Name::
Family Name:: Bhathena
City of Residence:: Andover
State or Province of Residence:: MA
Country of Residence:: US
Street of Mailing Address:: 60 William Street
City of Mailing Address:: Andover
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 01810

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Peter
Middle Name:: Demarest
Family Name:: Beaman
City of Residence:: Wellesley
State or Province of Residence:: MA

Country of Residence:: US
Street of Mailing Address:: 11 Lincoln Road
City of Mailing Address:: Wellesley
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 02481

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Stanislaw
Middle Name::
Family Name:: Kowalczyk
City of Residence:: Boston
State or Province of Residence:: MA
Country of Residence:: US
Street of Mailing Address:: 483 Beacon Street #16
City of Mailing Address:: Boston
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 02115

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Blair
Middle Name:: Francis
Family Name:: Wheeler
City of Residence:: Winchester
State or Province of Residence:: MA
Country of Residence:: US
Street of Mailing Address:: 9 Harrison Street
City of Mailing Address:: Winchester
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 01890

Correspondence Information

Correspondence Customer Number:: 23483

Phone Number:: 617-526-6000

Fax Number:: 617-526-5000

E-Mail Address::

Representative Information

Representative Customer Number:: 23483

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|---------------|-------------------|----------------------|----------------------|
| | | | |

Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
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Assignee Information

Assignee Name:: Relicore, Inc.
Street of Mailing Address:: 5 Burlington Woods Drive, Suite 201
City of Mailing Address:: Burlington
State of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 01803